

Please type a plus sign (+) inside this box ☒

# UTILITY

## PATENT APPLICATION TRANSMITTAL

Attorney Docket No.

MCP-284

First Inventor

SZYMCZAK et al.

Title

SIMETHICONE SOLID ORAL DOSAGE FORM

Express Mail Label No.

EL691438740US

PTO  
09/28/01  
JC978 U.S.  
1196  
09/28/01

09/28/01

### APPLICATION ELEMENTS

PEEP Chapter 600 concerning utility patent application contents.

### ADDRESS TO:

Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.
3. ☒ Specification [Total Pages 29]  
(Preferred arrangement set forth below)
  - Descriptive Title of the Invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R&D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☐ Drawing(s) (35 USC 113) [Total Sheets ]
5. Oath or Declaration [Total Pages 3]
  - a. ☒ Newly unexecuted original
  - b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)
    - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)

- a. ☐ Computer Readable Form (CRF)
- b. ☐ Specification Sequence Listing on:
  - i. ☐ CD-ROM or CD-R (2 copies); or
  - ii. ☐ paper
- c. ☐ Statement verifying identity of above copies

### ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney  
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Request and Certifications under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☒ Other: EXPRESS MAIL CERTIFICATE EL 691438740US

18. ☐ If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP) of prior application No.: , filed .

Prior application information: Examiner Group Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

### 19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label 000027777 or ☐ Correspondence Address below

Name: Philip S. Johnson, Esq.

Address: Johnson & Johnson  
One Johnson & Johnson Plaza  
New Brunswick, NJ 08933-7003 USA

### 20. TELEPHONE CONTACT

Please direct all telephone calls or telefaxes to Timothy E. Tracy at:

Telephone: (732) 524-6586 Fax: (732) 524-2808

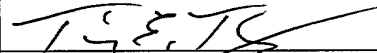
### 21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME

Timothy E. Tracy

Reg. No. 39401

SIGNATURE



DATE

September 28, 2001

**FEE TRANSMITTAL***Complete if Known*

Application Number	
Filing Date	
First Named Inventor	SZYMCZAK et al.
Group Art Unit	
Examiner Name	
Attorney Docket Number	MCP-284

**FEE CALCULATION**

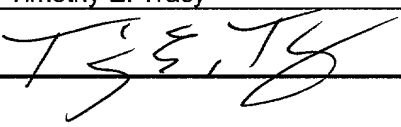
## CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$710.00
TOTAL CLAIMS	28 - 20 =	8	x 18.00	\$ 144.00
INDEPENDENT CLAIMS	4 - 3 =	1	x 80.00	\$ 80.00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$270.00	
			TOTAL FEES	\$ 934.00

**METHOD OF PAYMENT**

- ☒ Please charge Deposit Account No. 10-0750/MCP-284/TT in the amount of \$934.00.  
Three copies of this sheet are enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/MCP-284/TT. Three copies of this sheet are enclosed.

**SUBMITTED BY:***Complete (if applicable)*

Typed or Printed Name	Timothy E. Tracy	Reg. No. 39, 401
Signature		<b>Deposit Account No. 10-0750</b>
	Date: 09/28/2001	

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Christopher E. Szymczak and James T. Walter

For : SIMETHICONE SOLID ORAL DOSAGE FORM

Express Mail Certificate

"Express Mail" mailing number: EL691438740US

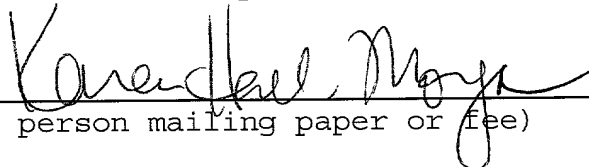
Date of Deposit: September 28, 2001

I hereby certify that this complete application, including specification pages, claims, abstract, and unexecuted Declaration and Power of Attorney, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

An executed Combined Declaration and Power of Attorney will be submitted to the United States Patent and Trademark Office upon receipt of the U.S. Serial Number for this patent application.

Karen Hall-Morgan

(Typed or printed name of person mailing paper or fee)



(Signature of person mailing paper or fee)

0996441 092001  
F08260" T4495660